

SECTION 404 (2) (c) Part 4
TOTAL CMHSP COSTS BY SERVICE
CATEGORY AND CMHSP
FY 2006

Persons with Developmental Disabilities
(DD)

Overview

The data that are presented in this section were provided by CMHSPs as required by the FY 2006 MDCH/CMHSP contract. Cost data were collected from October 1, 2005 to September 30, 2006 and submitted to MDCH by January 31, 2007. The data in this section represent the total costs associated with providing services to persons with developmental disabilities (DD) by service category for each of the 46 CMHSPs within the State of Michigan. Persons with developmental disabilities include adults and children.

Definitions for terms found in this section are presented in Section 404(3).

CMHSP Cost Data by Service Category
Persons with Developmental Disabilities
Fiscal Year 2005-2006
State of Michigan

Allegan Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	1	365	\$96,416	\$96,416	\$264	365
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	2	17	\$1,536	\$768	\$90	9
Medication Administration		90782		Encounter	2	9	\$813	\$407	\$90	5
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	48	51	\$9,161	\$191	\$180	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	39	247	\$18,367	\$471	\$74	6
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	34	271	\$37,582	\$1,105	\$139	8
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	4	4	\$880	\$220	\$220	1

CMHSP Cost Data by Service Category

Persons with Developmental Disabilities

Fiscal Year 2005-2006

State of Michigan

Allegan										
Service Category	Revenue Code	HCPDS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	6	24	\$2,732	\$455	\$114	4
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	102	425	\$40,133	\$393	\$94	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	14	17	\$3,905	\$279	\$230	1
Speech & Language Therapy		92507		Encounter	5	19	\$4,001	\$800	\$211	4
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	1	2	\$348	\$348	\$174	2
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			13	29	\$5,051	\$389	\$174	2
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	1	2	\$307	\$307	\$154	2
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	4	4	\$511	\$128	\$128	1
Occupational Therapy		97004		Encounter	27	38	\$5,220	\$193	\$137	1
Occupational or Physical Therapy		97110		15 Minutes	14	40	\$1,421	\$102	\$36	3
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	2	8	\$284	\$142	\$36	4
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	2	5	\$344	\$172	\$69	3
Occupational or Physical Therapy		97530		15 Minutes	27	197	\$7,174	\$266	\$36	7
Occupational or Physical Therapy		97532		15 Minutes	6	26	\$923	\$154	\$36	4
Occupational or Physical Therapy		97533		15 Minutes	8	71	\$2,557	\$320	\$36	9
Occupational or Physical Therapy		97535		15 Minutes	18	96	\$3,551	\$197	\$37	5
Occupational or Physical Therapy		97537		15 Minutes	2	8	\$284	\$142	\$36	4
Occupational or Physical Therapy		97542		15 Minutes	9	44	\$1,563	\$174	\$36	5
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	3	3	\$135	\$45	\$45	1
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	34	34	\$4,623	\$136	\$136	1
Treatment Planning		H0032		Encounter	111	201	\$19,080	\$172	\$95	2
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	1	247	\$9,841	\$9,841	\$40	247
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	2	223	\$12,113	\$6,057	\$54	112
Community Living Supports in Independent living/own home		H0043		Per diem	20	6,139	\$1,256,311	\$62,816	\$205	307
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	27	42	\$3,300	\$122	\$79	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	2	7	\$272	\$136	\$39	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	92	118,427	\$1,019,786	\$11,085	\$9	1,287
Community Living Supports (15 Minutes)		H2015		15 Minutes	144	630,226	\$2,103,998	\$14,611	\$3	4,377
Community Living Supports (Daily)		H2016		Per Diem	7	1,039	\$97,725	\$13,961	\$94	148
Community Living Supports (Daily)		H2016	TF	Per Diem	11	2,704	\$75,301	\$6,846	\$28	246
Community Living Supports (Daily)		H2016	TG	Per Diem	43	10,635	\$576,905	\$13,416	\$54	247
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	5	240	\$49,037	\$9,807	\$204	48
Supported Employment Services		H2023		15 minutes	172	35,290	\$756,008	\$4,395	\$21	205
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	19	19	\$1,573	\$83	\$83	1
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	11	125	\$44,964	\$4,088	\$360	11
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	2	13	\$1,009	\$505	\$78	7
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	68	54,186	\$47,479	\$698	\$1	797
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	1	12	\$447	\$447	\$37	12
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	2	38	\$1,776	\$888	\$47	19
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	52	54	\$4,447	\$86	\$82	1
Health Services		T1002		Up to 15 min	58	2,024	\$32,709	\$564	\$16	35
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	1	47	\$684	\$684	\$15	47
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	363	12,050	\$1,383,887	\$3,812	\$115	33
Targeted Case Management		T1017		15 minutes	7	8	\$6,697	\$957	\$837	1
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1	3	\$201	\$201	\$67	3
Personal Care in Licensed Specialized Residential Setting		T1020		Days	10	1,929	\$11,331	\$1,133	\$6	193
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	9	2,343	\$57,294	\$6,366	\$24	260
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	28	8,764	\$1,122,818	\$40,101	\$128	313
Assessments		T1023		Encounter	6	7	\$785	\$131	\$112	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	2	20	\$6,280	\$3,140	\$314	10
Fiscal Intermediary Services		T2025		Month	41	282	\$44,360	\$1,082	\$157	7
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			2	0	\$221	\$111	\$0	0
Total Population and Cost					395		\$8,998,461			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	1	348	\$86,119	\$86,119	\$247	348
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	74	88	\$10,492	\$142	\$119	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	12	74	\$2,324	\$194	\$31	6
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	16	72	\$4,671	\$292	\$65	5
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	3	5	\$468	\$156	\$94	2
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	1	10	\$329	\$329	\$33	10
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	98	565	\$29,494	\$301	\$52	6
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	1	1	\$62	\$62	\$62	1
Speech & Language Therapy		92506		Encounter	23	45	\$2,764	\$120	\$61	2
Speech & Language Therapy		92507		Encounter	10	30	\$2,805	\$281	\$94	3
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	6	11	\$1,029	\$172	\$94	2
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			0	0	\$0	\$0	\$0	0
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	6	11	\$1,029	\$172	\$94	2
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	2	2	\$183	\$92	\$92	1
Occupational Therapy		97004		Encounter	8	15	\$901	\$113	\$60	2
Occupational or Physical Therapy		97110		15 Minutes	5	8	\$84	\$17	\$11	2
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	1	26	\$2,185	\$2,185	\$84	26
Occupational or Physical Therapy		97532		15 Minutes	1	1	\$92	\$92	\$92	1
Occupational or Physical Therapy		97533		15 Minutes	1	10	\$859	\$859	\$86	10
Occupational or Physical Therapy		97535		15 Minutes	1	8	\$553	\$553	\$69	8
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	1	1	\$94	\$94	\$94	1
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	20	14	\$1,310	\$66	\$94	1
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	1	67	\$1,567	\$1,567	\$23	67
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	32	9,996	\$1,387,262	\$43,352	\$139	312
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	5	73	\$1,743	\$349	\$24	15
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	89	26,345	\$383,534	\$4,309	\$15	296
Community Living Supports (15 Minutes)		H2015		15 Minutes	120	229,890	\$2,038,280	\$16,986	\$9	1,916
Community Living Supports (Daily)		H2016		Per Diem	1	365	\$92,528	\$92,528	\$254	365
Community Living Supports (Daily)		H2016	TF	Per Diem	12	3,731	\$474,311	\$39,526	\$127	311
Community Living Supports (Daily)		H2016	TG	Per Diem	30	8,124	\$1,211,718	\$40,391	\$149	271
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	25	11,350	\$165,266	\$6,611	\$15	454
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	3	\$432	\$432	\$144	3
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	17	19,884	\$13,063	\$768	\$1	1,170
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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AuSable Valley										
Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	36	66	\$2,783	\$77	\$42	2
Health Services		T1002		Up to 15 min	62	264	\$2,783	\$45	\$11	4
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	3	3,777	\$10,967	\$3,656	\$3	1,259
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	135	1,552	\$61,316	\$454	\$40	11
Targeted Case Management		T1017		15 minutes	143	2,413	\$45,549	\$319	\$19	17
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	21	4,952	\$38,138	\$1,816	\$8	236
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	10	2,297	\$71,661	\$7,166	\$31	230
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	14	4,590	\$197,887	\$14,135	\$43	328
Assessments		T1023		Encounter	4	4	\$374	\$94	\$94	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	1	4	\$438	\$438	\$110	4
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					226		\$6,349,447			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	1	365	\$97,090	\$97,090	\$266	365
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	3	3	\$777	\$259	\$259	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	20	51	\$5,178	\$259	\$102	3
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	34	79	\$8,803	\$259	\$111	2
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	1	1	\$259	\$259	\$259	1

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	13	48	\$3,366	\$259	\$70	4
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	2	2	\$218	\$109	\$109	1
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	22	79	\$5,696	\$259	\$72	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	7	7	\$1,291	\$184	\$184	1
Speech & Language Therapy		92507		Encounter	21	107	\$3,339	\$159	\$31	5
Speech & Language Therapy		92508		Encounter	11	42	\$684	\$62	\$16	4
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation, Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			0	0	\$0	\$0	\$0	0
Psychological Testing by Technician (Children's Waiver)		96102			3	4	\$573	\$191	\$143	1
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	29	29	\$4,775	\$165	\$165	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	39	2,289	\$11,768	\$302	\$5	59
Occupational or Physical Therapy		97112		15 Minutes	1	1	\$101	\$101	\$101	1
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	2	2	\$50	\$25	\$25	1
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	1	1	\$25	\$25	\$25	1
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	2	2	\$323	\$162	\$162	1
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	61	194	\$28,786	\$472	\$148	3
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	1	172	\$9,159	\$9,159	\$53	172
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	2	145	\$5,591	\$2,796	\$39	73
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	6	11	\$2,047	\$341	\$186	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	0	0	\$0	\$0	\$0	0
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	3	372	\$1,488	\$496	\$4	124
Community Living Supports (15 Minutes)		H2015		15 Minutes	67	120,320	\$598,438	\$8,932	\$5	1,796
Community Living Supports (Daily)		H2016		Per Diem	5	1,549	\$23,421	\$4,684	\$15	310
Community Living Supports (Daily)		H2016	TF	Per Diem	4	1,083	\$49,893	\$12,473	\$46	271
Community Living Supports (Daily)		H2016	TG	Per Diem	16	5,099	\$678,580	\$42,411	\$133	319
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	39	32,351	\$36,068	\$925	\$1	830
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	13	55	\$500	\$38	\$9	4
Health Services		S9446		Encounter	20	446	\$6,497	\$325	\$15	22
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	9	32	\$2,301	\$256	\$72	4
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	18	19	\$2,190	\$122	\$115	1
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	72	545	\$78,408	\$1,089	\$144	8
Targeted Case Management		T1017		15 minutes	138	1,467	\$240,434	\$1,742	\$164	11
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	20	6,220	\$89,994	\$4,500	\$14	311
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	6	1,521	\$65,922	\$10,987	\$43	254
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	4	4	\$1,345	\$336	\$336	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	60	584	\$79,564	\$1,326	\$136	10
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	12	12	\$1,954	\$163	\$163	1
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					148		\$2,146,896			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	365	\$207,795	\$207,795	\$569	365
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	2	730	\$193,758	\$96,879	\$265	365
Local Psychiatric Hospital/TMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	7	47	\$31,321	\$4,474	\$666	7
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	5	34	\$496	\$99	\$15	7
Medication Administration		90782		Encounter	1	6	\$198	\$198	\$33	6
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	134	144	\$9,661	\$72	\$67	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	24	50	\$2,658	\$111	\$53	2
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	96	708	\$53,773	\$560	\$76	7
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	20	111	\$26,254	\$1,313	\$237	6

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	2	3	\$210	\$105	\$70	2
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	8	54	\$1,855	\$232	\$34	7
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	281	1,351	\$48,052	\$171	\$36	5
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation, Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	5	32	\$4,512	\$902	\$141	6
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			20	108	\$13,895	\$695	\$129	5
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	65	66	\$5,209	\$80	\$79	1
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	71	76	\$5,998	\$84	\$79	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	66	1,216	\$25,569	\$387	\$21	18
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	75	910	\$16,385	\$218	\$18	12
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	175	3,508	\$54,358	\$311	\$15	20
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	34	44	\$327	\$10	\$7	1
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			1	1	\$89	\$89	\$89	1
Additional Codes-Physician Services		99222			12	18	\$1,207	\$101	\$67	2
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			13	68	\$1,415	\$109	\$21	5
Additional Codes-Physician Services		99232			4	17	\$914	\$228	\$54	4
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	9	11	\$232	\$26	\$21	1
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Bay-Arenac

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	2	2	\$77	\$38	\$38	1
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	6	184	\$74	\$12	\$0	31
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	8	9	\$2,816	\$352	\$313	1
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			3	11	\$41	\$14	\$4	4
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	77	83	\$17,149	\$223	\$207	1
Treatment Planning		H0032		Encounter	170	1,061	\$128,402	\$755	\$121	6
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	11	940	\$42,659	\$3,878	\$45	85
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	13	521	\$3,232	\$249	\$6	40
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	3	445	\$40,924	\$13,641	\$92	148
Community Living Supports in Independent living/own home		H0043		Per diem	6	366	\$36,174	\$6,029	\$99	61
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	47	54	\$7,326	\$156	\$136	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	168	2,092	\$35,969	\$214	\$17	12
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	325	1,337,769	\$2,842,274	\$8,745	\$2	4,116
Community Living Supports (15 Minutes)		H2015		15 Minutes	70	322,830	\$1,022,689	\$14,610	\$3	4,612
Community Living Supports (Daily)		H2016		Per Diem	24	6,652	\$176,586	\$7,358	\$27	277
Community Living Supports (Daily)		H2016	TF	Per Diem	62	20,592	\$1,180,032	\$19,033	\$57	332
Community Living Supports (Daily)		H2016	TG	Per Diem	95	30,634	\$3,101,788	\$32,650	\$101	322
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	96	68,204	\$270,668	\$2,819	\$4	710
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	17	15,183	\$33,274	\$1,957	\$2	893
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	11	32	\$8,772	\$797	\$274	3
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	1	7	\$2,495	\$2,495	\$356	7
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	2	2	\$293	\$146	\$146	1
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	1	7	\$4,381	\$4,381	\$626	7
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	157	163	\$16,497	\$105	\$101	1
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	2	425	\$5,131	\$2,566	\$12	213
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	205	212	\$13,684	\$67	\$65	1
Health Services		T1002		Up to 15 min	244	18,228	\$325,822	\$1,335	\$18	75
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	106	117,914	\$238,695	\$2,252	\$2	1,112
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	484	15,703	\$1,621,531	\$3,350	\$103	32
Targeted Case Management		T1017		15 minutes	69	1,911	\$84,263	\$1,221	\$44	28
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	8	333	\$19,698	\$2,462	\$59	42
Personal Care in Licensed Specialized Residential Setting		T1020		Days	95	30,949	\$514,695	\$5,418	\$17	326
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	41	13,023	\$620,343	\$15,130	\$48	318
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	39	13,183	\$1,034,912	\$26,536	\$79	338
Assessments		T1023		Encounter	29	45	\$25,764	\$888	\$573	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	133	1,334	\$45,186	\$340	\$34	10
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	26	3,950	\$107,746	\$4,144	\$27	152
Transportation		T2003		Encounter / Trip	297	104,380	\$472,885	\$1,592	\$5	351
Transportation		T2004			15	3,690	\$3,779	\$252	\$1	246
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	4	42	\$40,429	\$10,107	\$963	11
Fiscal Intermediary Services		T2025		Month	12	133	\$13,129	\$1,094	\$99	11
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	6	6	\$3,450	\$575	\$575	1
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					1	0	\$7,384	\$7,384	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					711		\$14,879,257			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	3	800	\$191,200	\$63,733	\$239	267
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	2	17	\$14,061	\$7,031	\$827	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	11	242	\$163,365	\$14,851	\$675	22
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	13	129	\$7,567	\$582	\$59	10
Medication Administration		90782		Encounter	8	33	\$1,936	\$242	\$59	4
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	50	50	\$10,583	\$212	\$212	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	4	4	\$305	\$76	\$76	1
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	44	265	\$32,599	\$741	\$123	6
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	2	12	\$1,431	\$716	\$119	6
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	244	1,048	\$92,218	\$378	\$88	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	6	6	\$1,467	\$245	\$245	1
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			4	4	\$2,006	\$502	\$502	1
Psychological Testing by Technician (Children's Waiver)		96102			5	8	\$1,795	\$359	\$224	2
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Persons with Developmental Disabilities

Fiscal Year 2005-2006

State of Michigan

Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	2	4	\$422	\$211	\$106	2
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			7	11	\$1,355	\$194	\$123	2
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			11	214	\$8,788	\$799	\$41	19
Additional Codes-Physician Services		99232			3	4	\$235	\$78	\$59	1
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	11	15	\$722	\$66	\$48	1
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Persons with Developmental Disabilities

Fiscal Year 2005-2006

State of Michigan

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	188	1,883	\$342,072	\$1,820	\$182	10
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category
Persons with Developmental Disabilities
Fiscal Year 2005-2006
State of Michigan
Berrien

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	1	9	\$2,640	\$2,640	\$293	9
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	76	78	\$18,303	\$241	\$235	1
Treatment Planning		H0032		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	10	1,033	\$60,598	\$6,060	\$59	103
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	16	234	\$4,118	\$257	\$18	15
Peer Directed and Operated Support Services		NA			0	0	\$133,645	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	4	609	\$39,298	\$9,825	\$65	152
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	72	305	\$23,975	\$333	\$79	4
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	5	33	\$878	\$176	\$27	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	154	651,961	\$1,488,624	\$9,666	\$2	4,234
Community Living Supports (15 Minutes)		H2015		15 Minutes	210	999,754	\$3,158,492	\$15,040	\$3	4,761
Community Living Supports (Daily)		H2016		Per Diem	21	7,127	\$206,638	\$9,840	\$29	339
Community Living Supports (Daily)		H2016	TF	Per Diem	21	5,664	\$308,360	\$14,684	\$54	270
Community Living Supports (Daily)		H2016	TG	Per Diem	98	32,269	\$4,854,410	\$49,535	\$150	329
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	52	25,828	\$104,909	\$2,017	\$4	497
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	16	23,004	\$220,366	\$13,773	\$10	1,438
Medication Review		M0064		Encounter Face-to-Face	25	80	\$7,040	\$282	\$88	3
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	1	187	\$109,260	\$109,260	\$584	187
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	1	2	\$1,482	\$1,482	\$741	2
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			1	105	\$3,936	\$3,936	\$37	105

CMHSP Cost Data by Service Category
Persons with Developmental Disabilities
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State of Michigan
Berrien

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			1	4,182	\$134,122	\$134,122	\$32	4,182
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	9	9	\$1,584	\$176	\$176	1
Health Services		T1002		Up to 15 min	77	763	\$24,603	\$320	\$32	10
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	2	3,628	\$32,633	\$16,317	\$9	1,814
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	438	12,225	\$860,579	\$1,965	\$70	28
Targeted Case Management		T1017		15 minutes	45	1,192	\$76,918	\$1,709	\$65	26
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	4	70	\$704	\$176	\$10	18
Personal Care in Licensed Specialized Residential Setting		T1020		Days	83	26,537	\$511,887	\$6,167	\$19	320
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	32	9,862	\$581,199	\$18,162	\$59	308
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	25	8,722	\$975,803	\$39,032	\$112	349
Assessments		T1023		Encounter	20	36	\$6,336	\$317	\$176	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	2	3	\$352	\$176	\$117	2
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			20	0	\$26,596	\$1,330	\$0	0
Total Population and Cost					536		\$14,854,415			

CMHSP Cost Data by Service Category
Persons with Developmental Disabilities
Fiscal Year 2005-2006
State of Michigan
Clinton Eaton Ingham

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	7	2,103	\$1,156,789	\$165,256	\$550	300
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	3	1,095	\$281,164	\$93,721	\$257	365
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	8	74	\$6,394	\$799	\$86	9
Medication Administration		90782		Encounter	7	26	\$2,347	\$335	\$90	4
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	44	44	\$22,135	\$503	\$503	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	19	134	\$19,809	\$1,043	\$148	7
Therapy-Individual Therapy		90805		Encounter 20-30 Min	1	1	\$132	\$132	\$132	1
Therapy-Individual Therapy		90806		Encounter 45-50 Min	25	139	\$26,941	\$1,078	\$194	6
Therapy-Individual Therapy		90807		Encounter 45-50 Min	1	2	\$571	\$571	\$286	2
Therapy-Individual Therapy		90808		Encounter 75-80 Min	17	36	\$8,929	\$525	\$248	2

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	1	1	\$267	\$267	\$267	1
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	1	\$187	\$187	\$187	1
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	11	154	\$28,133	\$2,558	\$183	14
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	2	3	\$634	\$317	\$211	2
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	147	307	\$44,607	\$303	\$145	2
Speech & Language Therapy		92506		Encounter	137	145	\$22,995	\$168	\$159	1
Speech & Language Therapy		92507		Encounter	81	454	\$69,403	\$857	\$153	6
Speech & Language Therapy		92508		Encounter	33	617	\$44,161	\$1,338	\$72	19
Speech & Language Therapy		92526		Encounter	57	85	\$9,925	\$174	\$117	1
Speech & Language Therapy		92610		Encounter	23	23	\$3,937	\$171	\$171	1
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation, Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	5	7	\$3,188	\$638	\$455	1
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			33	45	\$21,062	\$638	\$468	1
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			1	2	\$838	\$838	\$419	2
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	3	3	\$1,057	\$352	\$352	1
Assessments-Other		96111		Encounter	7	11	\$6,592	\$942	\$599	2
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	19	21	\$1,659	\$87	\$79	1
Occupational Therapy		97004		Encounter	209	216	\$13,254	\$63	\$61	1
Occupational or Physical Therapy		97110		15 Minutes	47	714	\$24,848	\$529	\$35	15
Occupational or Physical Therapy		97112		15 Minutes	5	19	\$662	\$132	\$35	4
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	11	37	\$1,290	\$117	\$35	3
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	3	16	\$695	\$232	\$43	5
Occupational or Physical Therapy		97530		15 Minutes	8	72	\$2,511	\$314	\$35	9
Occupational or Physical Therapy		97532		15 Minutes	1	4	\$143	\$143	\$36	4
Occupational or Physical Therapy		97533		15 Minutes	32	679	\$24,361	\$761	\$36	21
Occupational or Physical Therapy		97535		15 Minutes	39	217	\$7,582	\$194	\$35	6
Occupational or Physical Therapy		97537		15 Minutes	2	20	\$10,293	\$5,147	\$515	10
Occupational or Physical Therapy		97542		15 Minutes	6	28	\$976	\$163	\$35	5
Occupational Therapy		97703		15 Minutes	3	15	\$523	\$174	\$35	5
Occupational Therapy		97750		15 Minutes	6	21	\$734	\$122	\$35	4
Occupational Therapy		97755		15 Minutes	60	373	\$21,803	\$363	\$58	6
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			15	68	\$363	\$24	\$5	5
Assessment or Health Services		97802		15 Minutes	218	653	\$54,168	\$248	\$83	3
Assessment or Health Services		97803		15 Minutes	160	665	\$21,613	\$135	\$33	4
Health Services		97804		30 Minutes	3	3	\$38	\$13	\$13	1
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	2	2	\$470	\$235	\$235	1
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	11	11	\$3,406	\$310	\$310	1
Treatment Planning		H0032		Encounter	461	949	\$112,020	\$243	\$118	2
Health Services		H0034		15 Minutes	17	84	\$4,759	\$280	\$57	5
Home Based Services		H0036		15 Minutes	3	24	\$1,316	\$439	\$55	8
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	5	7	\$381	\$76	\$54	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	1	2	\$173	\$173	\$87	2
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	537	1,127,897	\$3,864,921	\$7,197	\$3	2,100
Community Living Supports (15 Minutes)		H2015		15 Minutes	683	2,057,917	\$9,239,749	\$13,528	\$4	3,013
Community Living Supports (Daily)		H2016		Per Diem	210	65,817	\$1,377,167	\$6,558	\$21	313
Community Living Supports (Daily)		H2016	TF	Per Diem	83	24,925	\$1,293,767	\$15,588	\$52	300
Community Living Supports (Daily)		H2016	TG	Per Diem	151	48,061	\$5,555,107	\$36,789	\$116	318
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	66	4,090	\$325,012	\$4,924	\$79	62
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	349	1,660	\$206,482	\$592	\$124	5
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	13	19	\$1,276	\$98	\$67	1
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	3	1,029	\$31,117	\$10,372	\$30	343
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	14	14	\$5,415	\$387	\$387	1
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	5	7	\$416	\$83	\$59	1
Health Services		S9446		Encounter	1	1	\$78	\$78	\$78	1
Health Services		S9470		Encounter	57	92	\$2,294	\$40	\$25	2
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	4	5,639	\$147,010	\$36,753	\$26	1,410
Assessment		T1001		Encounter	256	277	\$25,570	\$100	\$92	1
Health Services		T1002		Up to 15 min	461	3,022	\$89,370	\$194	\$30	7
Health Services		T1003		Up to 15 min	1	1,014	\$2,783	\$2,783	\$3	1,014
Health Services		T1005		15 minutes	317	289,791	\$1,292,139	\$4,076	\$4	914
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	246	7,925	\$461,328	\$1,875	\$58	32
Targeted Case Management		T1017		15 minutes	943	31,192	\$1,843,447	\$1,955	\$59	33
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	271	84,174	\$663,915	\$2,450	\$8	311
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	51	17,165	\$964,768	\$18,917	\$56	337
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	115	37,503	\$5,430,130	\$47,219	\$145	326
Assessments		T1023		Encounter	293	404	\$34,732	\$119	\$86	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	7	19	\$1,146	\$164	\$60	3
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	4	4	\$908	\$227	\$227	1
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			3	0	\$18,242	\$6,081	\$0	0
Total Population and Cost					1,399		\$34,970,527			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	8	2,383	\$665,851	\$83,231	\$279	298
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	5	6	\$238	\$48	\$40	1
Medication Administration		90782		Encounter	3	4	\$159	\$53	\$40	1
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	14	14	\$2,231	\$159	\$159	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	7	20	\$914	\$131	\$46	3
Therapy-Individual Therapy		90805		Encounter 20-30 Min	2	2	\$380	\$190	\$190	1
Therapy-Individual Therapy		90806		Encounter 45-50 Min	51	558	\$52,073	\$1,021	\$93	11
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	4	6	\$837	\$209	\$140	2

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	2	2	\$184	\$92	\$92	1
Therapy-Family Therapy		90847		Encounter	1	1	\$92	\$92	\$92	1
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	4	5	\$994	\$249	\$199	1
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			0	0	\$0	\$0	\$0	0
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	29	29	\$5,056	\$174	\$174	1
Occupational Therapy		97004		Encounter	8	8	\$1,286	\$161	\$161	1
Occupational or Physical Therapy		97110		15 Minutes	49	373	\$11,865	\$242	\$32	8
Occupational or Physical Therapy		97112		15 Minutes	14	47	\$1,252	\$89	\$27	3
Occupational or Physical Therapy		97113		15 Minutes	3	36	\$921	\$307	\$26	12
Occupational or Physical Therapy		97116		15 Minutes	1	33	\$586	\$586	\$18	33
Occupational or Physical Therapy		97124		15 Minutes	1	10	\$178	\$178	\$18	10
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	1	1	\$27	\$27	\$27	1
Occupational or Physical Therapy		97530		15 Minutes	1	4	\$71	\$71	\$18	4
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	46	128	\$2,767	\$60	\$22	3
Occupational or Physical Therapy		97535		15 Minutes	20	77	\$2,170	\$109	\$28	4
Occupational or Physical Therapy		97537		15 Minutes	1	1	\$15	\$15	\$15	1
Occupational or Physical Therapy		97542		15 Minutes	14	40	\$1,068	\$76	\$27	3
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	1	2	\$53	\$53	\$27	2
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	7	28	\$642	\$92	\$23	4
Assessment or Health Services		97803		15 Minutes	20	119	\$5,263	\$263	\$44	6
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	1	1	\$139	\$139	\$139	1
Assessment		H0031		Encounter	9	10	\$1,623	\$180	\$162	1
Treatment Planning		H0032		Encounter	48	50	\$6,399	\$133	\$128	1
Health Services		H0034		15 Minutes	1	3	\$119	\$119	\$40	3
Home Based Services		H0036		15 Minutes	1	4	\$172	\$172	\$43	4
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	4	9	\$532	\$133	\$59	2
Community Living Supports in Independent living/own home		H0043		Per diem	68	1,925	\$202,356	\$2,976	\$105	28
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	22	53	\$1,637	\$74	\$31	2
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	313	633,283	\$2,476,137	\$7,911	\$4	2,023
Community Living Supports (15 Minutes)		H2015		15 Minutes	905	3,682,256	\$11,157,236	\$12,328	\$3	4,069
Community Living Supports (Daily)		H2016		Per Diem	130	42,354	\$801,433	\$6,165	\$19	326
Community Living Supports (Daily)		H2016	TF	Per Diem	119	37,713	\$1,853,842	\$15,579	\$49	317
Community Living Supports (Daily)		H2016	TG	Per Diem	142	45,325	\$4,470,069	\$31,479	\$99	319
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	333	578,242	\$1,306,827	\$3,924	\$2	1,736
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	4	18	\$2,119	\$530	\$118	5
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	14	57	\$32,851	\$2,347	\$576	4
Personal Emergency Response System (PERS)		S5161		Month	135	1,475	\$850,087	\$6,297	\$576	11
Environmental Modification		S5165		Service	6	10	\$13,847	\$2,308	\$1,385	2
Enhanced Medical Equipment-Supplies		S5199		Items	7	11	\$6,341	\$906	\$576	2
Occupational or Physical Therapy		S8990		Encounter	48	6,641	\$216,297	\$4,506	\$33	138
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			1	278	\$13,066	\$13,066	\$47	278

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			3	5,419	\$169,019	\$56,340	\$31	1,806
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	1	3	\$2,044	\$2,044	\$681	3
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	1	3	\$2,044	\$2,044	\$681	3
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	22	23	\$2,786	\$127	\$121	1
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	14	55	\$8,278	\$591	\$151	4
Health Services		T1002		Up to 15 min	7	49	\$2,716	\$388	\$55	7
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	343	304,489	\$334,938	\$976	\$1	888
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	1,015	48,781	\$3,458,573	\$3,407	\$71	48
Targeted Case Management		T1017		15 minutes	179	1,576	\$111,738	\$624	\$71	9
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1	2	\$142	\$142	\$71	2
Personal Care in Licensed Specialized Residential Setting		T1020		Days	145	46,111	\$786,809	\$5,426	\$17	318
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	117	35,913	\$1,688,337	\$14,430	\$47	307
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	129	42,539	\$4,661,713	\$36,137	\$110	330
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	20	56	\$1,971	\$99	\$35	3
Transportation		T2001			3	82	\$35	\$12	\$0	27
Transportation		T2002		Per Diem	503	24,824	\$446,832	\$888	\$18	49
Transportation		T2003		Encounter / Trip	373	60,241	\$722,892	\$1,938	\$12	162
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	275	194,795	\$1,470,702	\$5,348	\$8	708
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	79	459	\$45,900	\$581	\$100	6
Enhanced Medical Equipment-Supplies		T2028		Items	9	50	\$3,866	\$430	\$77	6
Enhanced Medical Equipment-Supplies		T2029		Items	36	49	\$38,569	\$1,071	\$787	1
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	14	105	\$25,900	\$1,850	\$247	8
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	14	201	\$37,185	\$2,656	\$185	14
Housing Assistance		T2038		Month	75	284	\$92,300	\$1,231	\$325	4
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			69	0	\$84,537	\$1,225	\$0	0
Total Population and Cost					1,777		\$38,370,128			

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Copper Country

Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/TMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	1	3	\$2,087	\$2,087	\$696	3
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	26	49	\$5,858	\$225	\$120	2
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	3	3	\$1,872	\$624	\$624	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	1	6	\$779	\$779	\$130	6
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	3	4	\$784	\$261	\$196	1
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	1	2	\$576	\$576	\$288	2
Therapy-Family Therapy		90847		Encounter	2	2	\$660	\$330	\$330	1
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	41	95	\$15,153	\$370	\$160	2
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			0	0	\$0	\$0	\$0	0
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	26	84	\$16,240	\$625	\$193	3
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	2	2	\$3,940	\$1,970	\$1,970	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	6	26	\$2,635	\$439	\$101	4
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	3	7	\$607	\$202	\$87	2
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	3	12	\$3,844	\$1,281	\$320	4
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	16	16	\$2,322	\$145	\$145	1
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	7	8	\$9,775	\$1,396	\$1,222	1
Additional Codes-Physician Services		99212		Encounter	7	8	\$7,104	\$1,015	\$888	1
Additional Codes-Physician Services		99213		Encounter	12	19	\$23,215	\$1,935	\$1,222	2
Additional Codes-Physician Services		99214		Encounter	39	42	\$60,866	\$1,561	\$1,449	1
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			2	8	\$979	\$489	\$122	4
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	59	85	\$26,701	\$453	\$314	1
Treatment Planning		H0032		Encounter	82	166	\$43,292	\$528	\$261	2
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	5	78	\$3,492	\$698	\$45	16
Behavior Management Review		H2000		Encounter	29	83	\$30,969	\$1,068	\$373	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	1	18	\$1,170	\$1,170	\$65	18
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	93	215,549	\$868,181	\$9,335	\$4	2,318
Community Living Supports (15 Minutes)		H2015		15 Minutes	127	58,749	\$600,490	\$4,728	\$10	463
Community Living Supports (Daily)		H2016		Per Diem	14	4,024	\$107,056	\$7,647	\$27	287
Community Living Supports (Daily)		H2016	TF	Per Diem	6	536	\$23,527	\$3,921	\$44	89
Community Living Supports (Daily)		H2016	TG	Per Diem	66	21,828	\$3,589,808	\$54,391	\$164	331
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	23	3,908	\$56,553	\$2,459	\$14	170
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	5	7,348	\$21,147	\$4,229	\$3	1,470
Medication Review		M0064		Encounter Face-to-Face	27	55	\$7,704	\$285	\$140	2
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	24	12,526	\$49,566	\$2,065	\$4	522
Respite		S5151		Per Diem	1	2	\$85	\$85	\$42	2
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	1	3	\$77	\$77	\$26	3
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	5	6	\$1,234	\$247	\$206	1
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Copper Country										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	54	73	\$14,407	\$267	\$197	1
Health Services		T1002		Up to 15 min	92	1,205	\$111,805	\$1,215	\$93	13
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	6	915	\$7,752	\$1,292	\$8	153
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	175	4,058	\$459,104	\$2,623	\$113	23
Targeted Case Management		T1017		15 minutes	3	63	\$5,887	\$1,962	\$93	21
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1	14	\$1,309	\$1,309	\$93	14
Personal Care in Licensed Specialized Residential Setting		T1020		Days	78	25,238	\$286,685	\$3,675	\$11	324
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	5	453	\$19,686	\$3,937	\$43	91
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	1	92	\$6,446	\$6,446	\$70	92
Assessments		T1023		Encounter	1	1	\$340	\$340	\$340	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	60	630	\$16,383	\$273	\$26	11
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	31	4,987	\$43,290	\$1,396	\$9	161
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	13	20	\$4,924	\$379	\$246	2
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			1	0	\$2,153	\$2,153	\$0	0
Total Population and Cost					193		\$6,570,517			

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Detroit-Wayne										
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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	19	2,675	\$1,276,696	\$67,195	\$477	141
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	48	14,966	\$4,076,320	\$84,923	\$272	312
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	112	2,004	\$1,098,684	\$9,810	\$548	18
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	54	786	\$519,429	\$9,619	\$661	15
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				1	2	\$300	\$300	\$150	2
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	16	21	\$4,898	\$306	\$233	1
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	6	93	\$30,710	\$5,118	\$330	16
Outpatient Partial Hospitalization	0913			Days	2	30	\$12,800	\$6,400	\$427	15
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	4	15	\$342	\$86	\$23	4
Medication Administration		90782		Encounter	26	31	\$714	\$27	\$23	1
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	1,106	1,627	\$238,286	\$215	\$146	1
Assessment-Psychiatric Assessment		90802		Encounter	11	14	\$1,522	\$138	\$109	1
Therapy-Individual Therapy		90804		Encounter 20-30 Min	734	2,464	\$125,797	\$171	\$51	3
Therapy-Individual Therapy		90805		Encounter 20-30 Min	174	232	\$15,586	\$90	\$67	1
Therapy-Individual Therapy		90806		Encounter 45-50 Min	1,195	9,556	\$868,362	\$727	\$91	8
Therapy-Individual Therapy		90807		Encounter 45-50 Min	571	1,096	\$83,025	\$145	\$76	2
Therapy-Individual Therapy		90808		Encounter 75-80 Min	149	437	\$53,870	\$362	\$123	3

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	3	4	\$358	\$119	\$90	1
Therapy-Individual Therapy		90811		Encounter 20-30 Min	3	11	\$979	\$326	\$89	4
Therapy-Individual Therapy		90812		Encounter 45-50 Min	3	18	\$2,146	\$715	\$119	6
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	1	2	\$411	\$411	\$206	2
Therapy-Individual Therapy		90815		Encounter 75-80 Min	5	9	\$360	\$72	\$40	2
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	1	2	\$200	\$200	\$100	2
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	1	1	\$73	\$73	\$73	1
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	160	555	\$70,894	\$443	\$128	3
Therapy-Family Therapy		90847		Encounter	677	3,244	\$402,054	\$594	\$124	5
Therapy-Family Therapy		90849		Encounter	4	5	\$525	\$131	\$105	1
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	288	4,364	\$176,878	\$614	\$41	15
Therapy-Group Therapy		90857		Encounter	14	26	\$1,380	\$99	\$53	2
Medication Review		90862		Encounter	1,691	6,194	\$647,951	\$383	\$105	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	750	1,258	\$64,043	\$85	\$51	2
Speech & Language Therapy		92506		Encounter	156	178	\$36,258	\$232	\$204	1
Speech & Language Therapy		92507		Encounter	193	2,010	\$204,639	\$1,060	\$102	10
Speech & Language Therapy		92508		Encounter	11	117	\$7,764	\$706	\$66	11
Speech & Language Therapy		92526		Encounter	531	799	\$121,884	\$230	\$153	2
Speech & Language Therapy		92610		Encounter	36	36	\$9,125	\$253	\$253	1
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation, Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	311	885	\$63,801	\$205	\$72	3
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			745	3,301	\$452,480	\$607	\$137	4
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	1,249	6,062	\$774,943	\$620	\$128	5
Assessments-Other		96111		Encounter	44	50	\$3,681	\$84	\$74	1
Assessments-Testing		96115		Hour	76	175	\$14,749	\$194	\$84	2
Neurobehavioral Status Exam (Children's Waiver)		96116			527	1,951	\$153,834	\$292	\$79	4
Assessments-Testing		96117		Hour	1	1	\$134	\$134	\$134	1
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	72	76	\$15,611	\$217	\$205	1
Physical Therapy		97002		Encounter	34	83	\$13,993	\$412	\$169	2
Occupational Therapy		97003		Encounter	307	342	\$72,407	\$236	\$212	1
Occupational Therapy		97004		Encounter	771	2,267	\$383,924	\$498	\$169	3
Occupational or Physical Therapy		97110		15 Minutes	214	6,526	\$158,695	\$742	\$24	30
Occupational or Physical Therapy		97112		15 Minutes	3	250	\$14,433	\$4,811	\$58	83
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	11	42	\$2,459	\$224	\$59	4
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	51	419	\$7,553	\$148	\$18	8
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	120	3,006	\$157,451	\$1,312	\$52	25
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	38	900	\$26,728	\$703	\$30	24
Occupational or Physical Therapy		97535		15 Minutes	26	135	\$2,073	\$80	\$15	5
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	95	506	\$19,277	\$203	\$38	5
Assessment or Health Services		97803		15 Minutes	939	6,522	\$354,486	\$378	\$54	7
Health Services		97804		30 Minutes	1	2	\$291	\$291	\$145	2
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	1	1	\$22	\$22	\$22	1
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	6	7	\$604	\$101	\$86	1
Additional Codes-Physician Services		99254		Encounter	4	6	\$840	\$210	\$140	2
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	2	5	\$407	\$203	\$81	3
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			2	462	\$23,510	\$11,755	\$51	231
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	14	281	\$18,579	\$1,327	\$66	20
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	326	573	\$131,343	\$403	\$229	2
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	53	56	\$8,769	\$165	\$157	1
Crisis Residential Services		H0018		Days	2	20	\$6,520	\$3,260	\$326	10
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	178	401	\$22,004	\$124	\$55	2
Assessment		H0031		Encounter	1,959	6,561	\$557,974	\$285	\$85	3
Treatment Planning		H0032		Encounter	1,246	2,694	\$502,381	\$403	\$186	2
Health Services		H0034		15 Minutes	194	842	\$25,591	\$132	\$30	4
Home Based Services		H0036		15 Minutes	16	2,496	\$121,224	\$7,577	\$49	156
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	10	18	\$38	\$4	\$2	2
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	890	77,927	\$10,356,507	\$11,637	\$133	88
Respite		H0045		Per Diem	150	1,814	\$696,764	\$4,645	\$384	12
Behavior Management Review		H2000		Encounter	1,161	2,847	\$148,781	\$128	\$52	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	78	410	\$29,929	\$384	\$73	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	2,924	8,466,603	\$24,288,031	\$8,306	\$3	2,896
Community Living Supports (15 Minutes)		H2015		15 Minutes	1,472	19,194,866	\$43,932,644	\$29,846	\$2	13,040
Community Living Supports (Daily)		H2016		Per Diem	451	124,678	\$7,918,673	\$17,558	\$64	276
Community Living Supports (Daily)		H2016	TF	Per Diem	498	109,481	\$6,497,405	\$13,047	\$59	220
Community Living Supports (Daily)		H2016	TG	Per Diem	1,021	280,260	\$30,026,892	\$29,409	\$107	274
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	685	973,110	\$3,625,529	\$5,293	\$4	1,421
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	7	13,442	\$60,560	\$8,651	\$5	1,920
Medication Review		M0064		Encounter Face-to-Face	22	28	\$417	\$19	\$15	1
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	300	662	\$41,182	\$137	\$62	2
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	10	1,898	\$342,430	\$34,243	\$180	190
Foster Care		S5145		Days	28	8,916	\$1,646,821	\$58,815	\$185	318
Respite		S5150		15 Minutes	215	114,672	\$235,040	\$1,093	\$2	533
Respite		S5151		Per Diem	2	525	\$7,949	\$3,975	\$15	263
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	28	29	\$32,000	\$1,143	\$1,103	1
Enhanced Medical Equipment-Supplies		S5199		Items	3	3	\$1,367	\$456	\$456	1
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			5	5,716	\$207,115	\$41,423	\$36	1,143

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Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			7	12,541	\$400,726	\$57,247	\$32	1,792
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	1,687	4,565	\$360,343	\$214	\$79	3
Health Services		S9446		Encounter	114	174	\$10,768	\$94	\$62	2
Health Services		S9470		Encounter	12	42	\$2,736	\$228	\$65	4
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	182	463	\$122,467	\$673	\$265	3
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1,906	6,556	\$1,198,792	\$629	\$183	3
Health Services		T1002		Up to 15 min	454	2,372	\$141,178	\$311	\$60	5
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	181	144,679	\$442,156	\$2,443	\$3	799
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	5,819	166,827	\$19,438,139	\$3,340	\$117	29
Targeted Case Management		T1017		15 minutes	457	9,417	\$411,099	\$900	\$44	21
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	1,200	337,901	\$5,325,953	\$4,438	\$16	282
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	488	95,434	\$4,365,569	\$8,946	\$46	196
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	377	75,538	\$6,740,072	\$17,878	\$89	200
Assessments		T1023		Encounter	155	179	\$56,996	\$368	\$318	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	8	9	\$5,083	\$635	\$565	1
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	8	27	\$2,529	\$316	\$94	3
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	128	688	\$113,320	\$885	\$165	5
Out of Home Prevocational Service		T2015		Hour	68	44,144	\$288,449	\$4,242	\$7	649
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	509	8,580	\$669,298	\$1,315	\$78	17
Enhanced Medical Equipment-Supplies		T2028		Items	1	2	\$336	\$336	\$168	2
Enhanced Medical Equipment-Supplies		T2029		Items	1	1	\$118	\$118	\$118	1
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	8	36	\$3,437	\$430	\$95	5
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	6	50	\$3,922	\$654	\$78	8
Housing Assistance		T2038		Month	483	8,589	\$1,048,442	\$2,171	\$122	18
Enhanced Medical Equipment-Supplies		T2039		Items	4	4	\$23,678	\$5,920	\$5,920	1
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					7,354		\$185,539,718			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	43	\$16,317	\$16,317	\$379	43
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	18	4,820	\$1,828,997	\$101,611	\$379	268
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	33	466	\$246,181	\$7,460	\$528	14
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	5	36	\$8,968	\$1,794	\$249	7
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	31	325	\$9,473	\$306	\$29	10
Medication Administration		90782		Encounter	20	74	\$2,163	\$108	\$29	4
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	651	689	\$115,512	\$177	\$168	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	5	16	\$718	\$144	\$45	3
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	21	81	\$5,165	\$246	\$64	4
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	1	1	\$92	\$92	\$92	1
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	13	49	\$4,753	\$366	\$97	4
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	4	27	\$1,753	\$438	\$65	7
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	2	2	\$187	\$93	\$93	1
Therapy-Family Therapy		90847		Encounter	14	42	\$3,847	\$275	\$92	3
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	3	13	\$343	\$114	\$26	4
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	666	2,854	\$414,422	\$622	\$145	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	37	75	\$15,516	\$419	\$207	2
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	81	431	\$89,165	\$1,101	\$207	5
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	22	42	\$8,628	\$392	\$205	2
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			18	34	\$5,550	\$308	\$163	2
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	125	130	\$26,894	\$215	\$207	1
Assessments-Other		96111		Encounter	3	7	\$0	\$0	\$0	2
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	34	34	\$7,034	\$207	\$207	1
Physical Therapy		97002		Encounter	125	431	\$89,165	\$713	\$207	3
Occupational Therapy		97003		Encounter	370	406	\$83,993	\$227	\$207	1
Occupational Therapy		97004		Encounter	376	1,123	\$232,326	\$618	\$207	3
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	5	15	\$3,103	\$621	\$207	3
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	111	119	\$24,619	\$222	\$207	1
Assessment or Health Services		97803		15 Minutes	167	389	\$80,476	\$482	\$207	2
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	1	1	\$173	\$173	\$173	1
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			3	3	\$171	\$57	\$57	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			3	9	\$179	\$60	\$20	3
Additional Codes-Physician Services		99232			3	6	\$171	\$57	\$29	2
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Genesee

Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	1	1	\$54	\$54	\$54	1
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	1	1	\$67	\$67	\$67	1
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	7	8	\$3,024	\$432	\$378	1
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Genesee

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	355	404	\$102,891	\$290	\$255	1
Crisis Residential Services		H0018		Days	9	53	\$13,083	\$1,454	\$247	6
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	687	2,110	\$293,794	\$428	\$139	3
Treatment Planning		H0032		Encounter	290	438	\$43,497	\$150	\$99	2
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	7	496	\$46,270	\$6,610	\$93	71
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	8	38	\$4,693	\$587	\$124	5
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	1	14	\$704	\$704	\$50	14
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	131	163	\$13,536	\$103	\$83	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	110	2,430	\$102,119	\$928	\$42	22
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	856	2,675,654	\$7,617,466	\$8,899	\$3	3,126
Community Living Supports (15 Minutes)		H2015		15 Minutes	386	621,226	\$2,160,861	\$5,598	\$3	1,609
Community Living Supports (Daily)		H2016		Per Diem	75	19,797	\$504,824	\$6,731	\$26	264
Community Living Supports (Daily)		H2016	TF	Per Diem	226	61,270	\$2,954,439	\$13,073	\$48	271
Community Living Supports (Daily)		H2016	TG	Per Diem	318	95,523	\$10,748,248	\$33,800	\$113	300
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	1	30	\$2,774	\$2,774	\$92	30
Supported Employment Services		H2023		15 minutes	89	37,429	\$232,808	\$2,616	\$6	421
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	35	63,135	\$308,736	\$8,821	\$5	1,804
Medication Review		M0064		Encounter Face-to-Face	56	142	\$22,509	\$402	\$159	3
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	57	86	\$15,110	\$265	\$176	2
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	1	70	\$613	\$613	\$9	70
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	5	6	\$37,317	\$7,463	\$6,219	1
Enhanced Medical Equipment-Supplies		S5199		Items	3	3	\$1,677	\$559	\$559	1
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPDS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	1	3,277	\$89,528	\$89,528	\$27	3,277
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	410	719	\$137,487	\$335	\$191	2
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	72	117	\$24,066	\$334	\$206	2
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	8	22	\$3,079	\$385	\$140	3
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	299	315	\$25,162	\$84	\$80	1
Health Services		T1002		Up to 15 min	295	8,730	\$880,975	\$2,986	\$101	30
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	313	519,256	\$1,585,308	\$5,065	\$3	1,659
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	651	28,219	\$1,461,496	\$2,245	\$52	43
Targeted Case Management		T1017		15 minutes	1,053	53,821	\$3,039,809	\$2,887	\$56	51
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	2	31	\$2,235	\$1,118	\$72	16
Personal Care in Licensed Specialized Residential Setting		T1020		Days	88	25,060	\$602,820	\$6,850	\$24	285
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	132	36,305	\$1,885,682	\$14,285	\$52	275
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	149	45,721	\$4,609,591	\$30,937	\$101	307
Assessments		T1023		Encounter	63	129	\$18,520	\$294	\$144	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	5	14	\$1,180	\$236	\$84	3
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	1	87	\$890	\$890	\$10	87
Transportation		T2003		Encounter / Trip	675	125,788	\$2,428,692	\$3,598	\$19	186
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	26	27	\$364	\$14	\$13	1
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	5	129	\$39,180	\$7,836	\$304	26
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	3	3	\$1,271	\$424	\$424	1
Enhanced Medical Equipment-Supplies		T2029		Items	13	14	\$24,682	\$1,899	\$1,763	1
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	25	33	\$8,006	\$320	\$243	1
Enhanced Medical Equipment-Supplies		T2039		Items	4	4	\$8,430	\$2,107	\$2,107	1
Pharmacy (Drugs and Other Biologicals)					0	0	\$517,099	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					1,627		\$45,952,718			

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Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	452	\$140,843	\$70,422	\$312	226
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	2	50	\$37,190	\$18,595	\$744	25
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	1	15	\$1,198	\$1,198	\$80	15
Medication Administration		90782		Encounter	1	2	\$133	\$133	\$66	2
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	27	27	\$17,393	\$644	\$644	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	4	6	\$1,245	\$311	\$207	2
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Gogebic

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	2	\$442	\$442	\$221	2
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	12	111	\$8,536	\$711	\$77	9
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	39	160	\$42,667	\$1,094	\$267	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	1	1	\$320	\$320	\$320	1
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation, Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			1	4	\$877	\$877	\$219	4
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	6	6	\$3,061	\$510	\$510	1
Occupational Therapy		97004		Encounter	30	32	\$11,326	\$378	\$354	1
Occupational or Physical Therapy		97110		15 Minutes	2	88	\$3,545	\$1,772	\$40	44
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	1	124	\$4,995	\$4,995	\$40	124
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	1	38	\$1,531	\$1,531	\$40	38
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	1	28	\$1,128	\$1,128	\$40	28
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	1	41	\$1,651	\$1,651	\$40	41
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Gagebic										
Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	21	21	\$4,360	\$208	\$208	1
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	10	12	\$5,342	\$534	\$445	1
Treatment Planning		H0032		Encounter	43	145	\$47,222	\$1,098	\$326	3
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	1	153	\$5,782	\$5,782	\$38	153
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	11	54	\$15,041	\$1,367	\$279	5
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	7	38	\$2,059	\$294	\$54	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	39	86,063	\$199,666	\$5,120	\$2	2,207
Community Living Supports (15 Minutes)		H2015		15 Minutes	54	34,889	\$162,234	\$3,004	\$5	646
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	1	320	\$16,131	\$16,131	\$50	320
Community Living Supports (Daily)		H2016	TG	Per Diem	36	10,642	\$1,725,707	\$47,936	\$162	296
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	19	947	\$39,121	\$2,059	\$41	50
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	28	44	\$1,384	\$49	\$31	2
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	20	11,974	\$37,479	\$1,874	\$3	599
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	5	8	\$111	\$22	\$14	2
Occupational or Physical Therapy		S8990		Encounter	4	155	\$13,626	\$3,407	\$88	39
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	5	5	\$603	\$121	\$121	1
Health Services		S9446		Encounter	1	3	\$1,141	\$1,141	\$380	3
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	26	27	\$14,567	\$560	\$540	1
Health Services		T1002		Up to 15 min	32	286	\$16,365	\$511	\$57	9
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	1	877	\$3,192	\$3,192	\$4	877
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	100	5,223	\$181,865	\$1,819	\$35	52
Targeted Case Management		T1017		15 minutes	19	1,291	\$45,805	\$2,411	\$35	68
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	3	24	\$836	\$279	\$35	8
Personal Care in Licensed Specialized Residential Setting		T1020		Days	29	8,338	\$138,828	\$4,787	\$17	288
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	9	2,624	\$105,695	\$11,744	\$40	292
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	3	4	\$1,523	\$508	\$381	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	2	19	\$243	\$121	\$13	10
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	2	2,168	\$3,556	\$1,778	\$2	1,084
Targeted Case Management (Children's Waiver)		T2023		Month	1	5	\$627	\$627	\$125	5
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					113		\$3,068,186			

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	539	\$151,155	\$75,578	\$280	270
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	1	4	\$2,596	\$2,596	\$649	4
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	5	6	\$1,968	\$394	\$328	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	6	8	\$404	\$67	\$51	1
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	14	118	\$11,746	\$839	\$100	8
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	4	17	\$2,536	\$634	\$149	4

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	2	7	\$621	\$310	\$89	4
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	1	24	\$2,227	\$2,227	\$93	24
Therapy-Family Therapy		90847		Encounter	1	38	\$3,425	\$3,425	\$90	38
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	67	339	\$59,311	\$885	\$175	5
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	5	5	\$3,112	\$622	\$622	1
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			0	0	\$0	\$0	\$0	0
Psychological Testing by Technician (Children's Waiver)		96102			10	18	\$3,799	\$380	\$211	2
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	7	8	\$1,524	\$218	\$191	1
Neurobehavioral Status Exam (Children's Waiver)		96116			22	25	\$5,627	\$256	\$225	1
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	17	17	\$5,503	\$324	\$324	1
Occupational Therapy		97004		Encounter	40	279	\$31,990	\$800	\$115	7
Occupational or Physical Therapy		97110		15 Minutes	4	13	\$373	\$93	\$29	3
Occupational or Physical Therapy		97112		15 Minutes	4	16	\$459	\$115	\$29	4
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	1	12	\$203	\$203	\$17	12
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	1	12	\$344	\$344	\$29	12
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	6	16	\$459	\$76	\$29	3
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Gratios										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	102	106	\$27,370	\$268	\$258	1
Treatment Planning		H0032		Encounter	39	140	\$25,897	\$664	\$185	4
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	1	97	\$11,682	\$11,682	\$120	97
Behavior Management Review		H2000		Encounter	31	97	\$4,644	\$150	\$48	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	13	55	\$8,864	\$682	\$161	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	88	123,728	\$465,217	\$5,287	\$4	1,406
Community Living Supports (15 Minutes)		H2015		15 Minutes	87	229,975	\$1,492,538	\$17,156	\$6	2,643
Community Living Supports (Daily)		H2016		Per Diem	12	2,052	\$118,503	\$9,875	\$58	171
Community Living Supports (Daily)		H2016	TF	Per Diem	8	2,428	\$178,628	\$22,328	\$74	304
Community Living Supports (Daily)		H2016	TG	Per Diem	35	12,171	\$1,628,480	\$46,528	\$134	348
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	81	87,084	\$334,403	\$4,128	\$4	1,075
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	47	62,953	\$100,725	\$2,143	\$2	1,339
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	51	409	\$491	\$10	\$1	8
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Service Category										
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	23	729	\$77,223	\$3,358	\$106	32
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1	1	\$302	\$302	\$302	1
Health Services		T1002		Up to 15 min	45	256	\$19,612	\$436	\$77	6
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	2	8,619	\$68,262	\$34,131	\$8	4,310
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	170	6,325	\$493,224	\$2,901	\$78	37
Targeted Case Management		T1017		15 minutes	34	207	\$10,493	\$309	\$51	6
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	32	9,432	\$212,314	\$6,635	\$23	295
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	19	6,859	\$232,794	\$12,252	\$34	361
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	1	363	\$10,494	\$10,494	\$29	363
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	54	350	\$420	\$8	\$1	6
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	9	32	\$10,892	\$1,210	\$340	4
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	2	8	\$3,114	\$1,557	\$389	4
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					218		\$5,825,967			

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Service Category	Revenue Code	HCPDS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	4	551	\$145,160	\$36,290	\$263	138
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	7	19	\$1,979	\$283	\$104	3
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	4	4	\$1,451	\$363	\$363	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	6	39	\$1,267	\$211	\$32	7
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	1	\$37	\$37	\$37	1
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	67	173	\$21,036	\$314	\$122	3
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	6	6	\$8,236	\$1,373	\$1,373	1
Speech & Language Therapy		92507		Encounter	25	109	\$47,319	\$1,893	\$434	4
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation, Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	19	59	\$81,572	\$4,293	\$1,383	3
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			0	0	\$0	\$0	\$0	0
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	2	2	\$988	\$494	\$494	1
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	12	12	\$9,573	\$798	\$798	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	54	662	\$93,283	\$1,727	\$141	12
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	32	34	\$5,585	\$175	\$164	1
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	65	67	\$26,957	\$415	\$402	1
Treatment Planning		H0032		Encounter	86	115	\$36,549	\$425	\$318	1
Health Services		H0034		15 Minutes	2	9	\$1,126	\$563	\$125	5
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	55	161	\$2,209	\$40	\$14	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	0	0	\$0	\$0	\$0	0
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	377	301,317	\$1,181,016	\$3,133	\$4	799
Community Living Supports (15 Minutes)		H2015		15 Minutes	384	82,279	\$492,746	\$1,283	\$6	214
Community Living Supports (Daily)		H2016		Per Diem	6	1,941	\$48,112	\$8,019	\$25	324
Community Living Supports (Daily)		H2016	TF	Per Diem	4	1,106	\$61,993	\$15,498	\$56	277
Community Living Supports (Daily)		H2016	TG	Per Diem	83	22,080	\$3,189,961	\$38,433	\$144	266
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	66	15,686	\$103,802	\$1,573	\$7	238
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	20	37	\$1,813	\$91	\$49	2
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	23	92	\$2,040	\$89	\$22	4
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	3	24	\$7,872	\$2,624	\$328	8
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	2	4	\$58	\$29	\$15	2
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Persons with Developmental Disabilities

Fiscal Year 2005-2006

State of Michigan

Hiawatha

Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	29	30	\$35,351	\$1,219	\$1,178	1
Health Services		T1002		Up to 15 min	37	303	\$68,955	\$1,864	\$228	8
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	127	77,767	\$174,013	\$1,370	\$2	612
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	318	5,225	\$491,152	\$1,545	\$94	16
Targeted Case Management		T1017		15 minutes	65	1,466	\$81,807	\$1,259	\$56	23
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	79	17,569	\$232,475	\$2,943	\$13	222
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	27	4,999	\$235,098	\$8,707	\$47	185
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	7	1,466	\$104,339	\$14,906	\$71	209
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	48	371	\$13,506	\$281	\$36	8
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	12	76	\$26,293	\$2,191	\$346	6
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	10	17	\$398	\$40	\$23	2
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	2	2	\$7,316	\$3,658	\$3,658	1
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					306		\$7,044,445			

CMHSP Cost Data by Service Category
Persons with Developmental Disabilities
Fiscal Year 2005-2006
State of Michigan
Huron

Service Category	Revenue Code	HCPDS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	57	\$30,128	\$30,128	\$529	57
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	2	25	\$1,023	\$512	\$41	13
Medication Administration		90782		Encounter	2	5	\$205	\$102	\$41	3
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	2	2	\$158	\$79	\$79	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	1	1	\$28	\$28	\$28	1
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	4	16	\$2,497	\$624	\$156	4
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	1	1	\$64	\$64	\$64	1

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Persons with Developmental Disabilities

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Huron

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	1	14	\$737	\$737	\$53	14
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	54	131	\$8,158	\$151	\$62	2
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	3	18	\$3,895	\$1,298	\$216	6
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			23	126	\$26,682	\$1,160	\$212	5
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	19	20	\$4,181	\$220	\$209	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	19	190	\$10,513	\$553	\$55	10
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	2	2	\$982	\$491	\$491	1
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	15	36	\$7,302	\$487	\$203	2
Additional Codes-Physician Services		99215		Encounter	3	3	\$1,228	\$409	\$409	1
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Huron

Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	1	1	\$71	\$71	\$71	1
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	1	2	\$1	\$1	\$1	2
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	4	5	\$140	\$35	\$28	1
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	3	55	\$32,251	\$10,750	\$586	18
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	6	6	\$1,754	\$292	\$292	1
Treatment Planning		H0032		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	9	14	\$4,063	\$451	\$290	2
Respite		H0045		Per Diem	27	153	\$13,167	\$488	\$86	6
Behavior Management Review		H2000		Encounter	17	19	\$3,504	\$206	\$184	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	8	28	\$1,801	\$225	\$64	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	89	60,042	\$650,398	\$7,308	\$11	675
Community Living Supports (15 Minutes)		H2015		15 Minutes	34	238,944	\$619,411	\$18,218	\$3	7,028
Community Living Supports (Daily)		H2016		Per Diem	13	4,326	\$103,482	\$7,960	\$24	333
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	21	6,872	\$1,509,732	\$71,892	\$220	327
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	78	108,601	\$674,055	\$8,642	\$6	1,392
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	1	2	\$149	\$149	\$74	2
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	18	18	\$3,762	\$209	\$209	1
Health Services		T1002		Up to 15 min	24	706	\$39,026	\$1,626	\$55	29
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	15	5,773	\$7,835	\$522	\$1	385
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	127	5,234	\$380,909	\$2,999	\$73	41
Targeted Case Management		T1017		15 minutes	25	1,238	\$54,462	\$2,178	\$44	50
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1	12	\$535	\$535	\$45	12
Personal Care in Licensed Specialized Residential Setting		T1020		Days	27	8,975	\$153,460	\$5,684	\$17	332
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	14	2,219	\$101,097	\$7,221	\$46	159
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	2	4	\$312	\$156	\$78	2
Assessments		T1023		Encounter	3	5	\$1,462	\$487	\$292	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	1	75	\$587	\$587	\$8	75
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	2	20	\$2,000	\$1,000	\$100	10
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					178		\$4,457,208			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	730	\$174,470	\$87,235	\$239	365
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	1	365	\$186,880	\$186,880	\$512	365
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	2	31	\$17,509	\$8,754	\$565	16
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	2	10	\$5,648	\$2,824	\$565	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	14	14	\$7,152	\$511	\$511	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	16	75	\$5,882	\$368	\$78	5
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	1	1	\$127	\$127	\$127	1

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	6	\$471	\$471	\$79	6
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	11	44	\$1,919	\$174	\$44	4
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	46	182	\$32,234	\$701	\$177	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	1	1	\$198	\$198	\$198	1
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	1	1	\$85	\$85	\$85	1
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			0	0	\$0	\$0	\$0	0
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	6	6	\$1,696	\$283	\$283	1
Occupational Therapy		97004		Encounter	7	7	\$825	\$118	\$118	1
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	2	9	\$212	\$106	\$24	5
Assessment or Health Services		97803		15 Minutes	7	34	\$802	\$115	\$24	5
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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State of Michigan

Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	1	1	\$127	\$127	\$127	1
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	35	42	\$3,606	\$103	\$86	1
Treatment Planning		H0032		Encounter	37	42	\$3,606	\$97	\$86	1
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	5	198	\$11,878	\$2,376	\$60	40
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	19	6,239	\$1,812,542	\$95,397	\$291	328
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	7	8	\$311	\$44	\$39	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	14	142	\$8,762	\$626	\$62	10
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	12	2,982	\$64,182	\$5,349	\$22	249
Community Living Supports (15 Minutes)		H2015		15 Minutes	80	52,192	\$435,765	\$5,447	\$8	652
Community Living Supports (Daily)		H2016		Per Diem	17	5,112	\$119,020	\$7,001	\$23	301
Community Living Supports (Daily)		H2016	TF	Per Diem	6	1,825	\$85,288	\$14,215	\$47	304
Community Living Supports (Daily)		H2016	TG	Per Diem	10	2,915	\$328,479	\$32,848	\$113	292
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	22	2,745	\$67,252	\$3,057	\$24	125
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	26	151	\$27,798	\$1,069	\$184	6
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	8	38	\$11,611	\$1,451	\$306	5
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	3	28	\$2,991	\$997	\$107	9
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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State of Michigan

Ionia										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	2	2	\$1,272	\$636	\$636	1
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	13	13	\$372	\$29	\$29	1
Health Services		T1002		Up to 15 min	25	401	\$14,691	\$588	\$37	16
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	22	16,357	\$105,804	\$4,809	\$6	744
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	41	2,803	\$134,458	\$3,279	\$48	68
Targeted Case Management		T1017		15 minutes	131	4,813	\$276,060	\$2,107	\$57	37
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1	1	\$58	\$58	\$58	1
Personal Care in Licensed Specialized Residential Setting		T1020		Days	23	7,114	\$111,172	\$4,834	\$16	309
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	5	912	\$62,103	\$12,421	\$68	182
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	5	1,825	\$264,513	\$52,903	\$145	365
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	3	15	\$2,147	\$716	\$143	5
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	2	4	\$1,286	\$643	\$321	2
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	1	1	\$725	\$725	\$725	1
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					209		\$4,393,988			

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Kalamazoo

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	3	236	\$126,325	\$42,108	\$535	79
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	5	1,184	\$336,568	\$67,314	\$284	237
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	1	3	\$950	\$950	\$317	3
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	4	6	\$94	\$24	\$16	2
Medication Administration		90782		Encounter	3	10	\$900	\$300	\$90	3
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	224	246	\$98,610	\$440	\$401	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	42	456	\$47,928	\$1,141	\$105	11
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Kalamazoo										
Service Category	Revenue Code	HCPDS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	271	1,012	\$153,573	\$567	\$152	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	2	44	\$3,658	\$1,829	\$83	22
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	4	8	\$600	\$150	\$75	2
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			11	21	\$3,054	\$278	\$145	2
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	49	49	\$6,634	\$135	\$135	1
Physical Therapy		97002		Encounter	16	17	\$1,116	\$70	\$66	1
Occupational Therapy		97003		Encounter	9	9	\$1,114	\$124	\$124	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	13	472	\$12,531	\$964	\$27	36
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	5	712	\$9,790	\$1,958	\$14	142
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	14	477	\$13,531	\$967	\$28	34
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	4	26	\$685	\$171	\$26	7
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	4	9	\$1,098	\$275	\$122	2
Additional Codes-Physician Services		99215		Encounter	3	6	\$1,008	\$336	\$168	2
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Persons with Developmental Disabilities

Fiscal Year 2005-2006

State of Michigan

Kalamazoo

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	2	2	\$772	\$386	\$386	1
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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State of Michigan

Kalamazoo										
Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	116	117	\$8,091	\$70	\$69	1
Crisis Residential Services		H0018		Days	12	203	\$53,105	\$4,425	\$262	17
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	108	587	\$85,880	\$795	\$146	5
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	24	5,194	\$169,392	\$7,058	\$33	216
Community Living Supports in Independent living/own home		H0043		Per diem	56	15,493	\$1,802,028	\$32,179	\$116	277
Respite		H0045		Per Diem	1	5	\$1,250	\$1,250	\$250	5
Behavior Management Review		H2000		Encounter	93	323	\$5,393	\$58	\$17	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	0	0	\$0	\$0	\$0	0
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	333	1,139,906	\$3,234,980	\$9,715	\$3	3,423
Community Living Supports (15 Minutes)		H2015		15 Minutes	164	964,360	\$2,678,368	\$16,332	\$3	5,880
Community Living Supports (Daily)		H2016		Per Diem	11	3,507	\$148,469	\$13,497	\$42	319
Community Living Supports (Daily)		H2016	TF	Per Diem	110	35,128	\$3,606,259	\$32,784	\$103	319
Community Living Supports (Daily)		H2016	TG	Per Diem	91	27,330	\$1,922,641	\$21,128	\$70	300
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	3	3	\$77	\$26	\$26	1
Supported Employment Services		H2023		15 minutes	158	65,999	\$731,461	\$4,630	\$11	418
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	22	27,329	\$88,740	\$4,034	\$3	1,242
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	17	\$1,275	\$1,275	\$75	17
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	5	56	\$3,477	\$695	\$62	11
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	254	270,685	\$468,529	\$1,845	\$2	1,066
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	59	1,151	\$74,274	\$1,259	\$65	20
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Kalamazoo										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			1	408	\$4,772	\$4,772	\$12	408
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	79	79	\$8,948	\$113	\$113	1
Health Services		T1002		Up to 15 min	320	3,161	\$150,334	\$470	\$48	10
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	54	41,888	\$320,474	\$5,935	\$8	776
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	601	52,846	\$1,956,332	\$3,255	\$37	88
Targeted Case Management		T1017		15 minutes	41	3,376	\$193,143	\$4,711	\$57	82
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	41	12,355	\$238,557	\$5,818	\$19	301
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	130	42,084	\$2,452,432	\$18,865	\$58	324
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	36	10,195	\$938,976	\$26,083	\$92	283
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	12	118	\$34,058	\$2,838	\$289	10
Fiscal Intermediary Services		T2025		Month	54	482	\$60,226	\$1,115	\$125	9
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$14,960	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	20	196	\$30,934	\$1,547	\$158	10
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					7	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'I' Codes		ALL			5	0	\$0	\$0	\$0	0
Total Population and Cost					901		\$22,308,374			

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Lapeer

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	52	\$29,697	\$29,697	\$571	52
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	3	51	\$32,227	\$10,742	\$632	17
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	1	1	\$46	\$46	\$46	1
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	23	25	\$6,341	\$276	\$254	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	6	19	\$1,732	\$289	\$91	3
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	17	128	\$22,036	\$1,296	\$172	8
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	1	1	\$262	\$262	\$262	1

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Lapeer	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	4	18	\$3,209	\$802	\$178	5
Therapy-Family Therapy		90847		Encounter	5	28	\$4,951	\$990	\$177	6
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	2	7	\$2,491	\$1,246	\$356	4
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	108	502	\$76,500	\$708	\$152	5
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			5	8	\$1,782	\$356	\$223	2
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	1	1	\$370	\$370	\$370	1
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	1	1	\$83	\$83	\$83	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	1	25	\$7,743	\$7,743	\$310	25
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	50	52	\$9,632	\$193	\$185	1
Treatment Planning		H0032		Encounter	79	324	\$46,562	\$589	\$144	4
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	9	1,610	\$75,960	\$8,440	\$47	179
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	78	165	\$9,733	\$125	\$59	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	1	4	\$187	\$187	\$47	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	187	658,918	\$2,003,111	\$10,712	\$3	3,524
Community Living Supports (15 Minutes)		H2015		15 Minutes	35	56,964	\$346,341	\$9,895	\$6	1,628
Community Living Supports (Daily)		H2016		Per Diem	29	7,377	\$182,655	\$6,298	\$25	254
Community Living Supports (Daily)		H2016	TF	Per Diem	32	7,980	\$385,913	\$12,060	\$48	249
Community Living Supports (Daily)		H2016	TG	Per Diem	54	18,084	\$2,137,167	\$39,577	\$118	335
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	55	70,553	\$390,158	\$7,094	\$6	1,283
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	1	4,764	\$19,342	\$19,342	\$4	4,764
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Service Category										
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	15	15	\$2,566	\$171	\$171	1
Health Services		T1002		Up to 15 min	2	54	\$2,456	\$1,228	\$45	27
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	55	43,648	\$116,977	\$2,127	\$3	794
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	303	5,410	\$476,405	\$1,572	\$88	18
Targeted Case Management		T1017		15 minutes	7	135	\$10,868	\$1,553	\$81	19
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	2	10	\$576	\$288	\$58	5
Personal Care in Licensed Specialized Residential Setting		T1020		Days	62	18,606	\$177,315	\$2,860	\$10	300
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	38	12,234	\$607,540	\$15,988	\$50	322
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	9	2,601	\$153,225	\$17,025	\$59	289
Assessments		T1023		Encounter	3	4	\$1,403	\$468	\$351	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	1	2	\$209	\$209	\$105	2
Out of Home Prevocational Service		T2015		Hour	7	2,671	\$21,021	\$3,003	\$8	382
Targeted Case Management (Children's Waiver)		T2023		Month	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	23	532	\$136,878	\$5,951	\$257	23
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	11	56	\$4,692	\$427	\$84	5
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	1	1	\$8,595	\$8,595	\$8,595	1
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					321		\$7,516,957			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	2	726	\$207,105	\$103,553	\$285	363
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	2	16	\$11,456	\$5,728	\$716	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	1	19	\$3,040	\$3,040	\$160	19
Medication Administration		90782		Encounter	1	6	\$361	\$361	\$60	6
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	4	4	\$1,227	\$307	\$307	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	1	23	\$3,381	\$3,381	\$147	23
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Persons with Developmental Disabilities

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State of Michigan

Lenawee

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	1	3	\$110	\$110	\$37	3
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	81	391	\$59,964	\$740	\$153	5
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	27	100	\$12,310	\$456	\$123	4
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	2	8	\$2,413	\$1,207	\$302	4
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			7	20	\$3,020	\$431	\$151	3
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Persons with Developmental Disabilities

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Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	60	135	\$45,679	\$761	\$338	2
Treatment Planning		H0032		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	1	2	\$477	\$477	\$239	2
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	159	466,958	\$1,358,848	\$8,546	\$3	2,937
Community Living Supports (15 Minutes)		H2015		15 Minutes	24	183,267	\$788,048	\$32,835	\$4	7,636
Community Living Supports (Daily)		H2016		Per Diem	14	4,794	\$112,515	\$8,037	\$23	342
Community Living Supports (Daily)		H2016	TF	Per Diem	16	5,253	\$349,114	\$21,820	\$66	328
Community Living Supports (Daily)		H2016	TG	Per Diem	39	13,746	\$2,162,321	\$55,444	\$157	352
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	6	6,655	\$39,464	\$6,577	\$6	1,109
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	1	11	\$8,100	\$8,100	\$736	11
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	42	43	\$8,716	\$208	\$203	1
Health Services		T1002		Up to 15 min	111	2,426	\$322,658	\$2,907	\$133	22
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	2	8,348	\$23,124	\$11,562	\$3	4,174
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	233	4,537	\$703,235	\$3,018	\$155	19
Targeted Case Management		T1017		15 minutes	1	45	\$5,985	\$5,985	\$133	45
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	23	7,948	\$199,733	\$8,684	\$25	346
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	16	5,201	\$329,587	\$20,599	\$63	325
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	30	10,622	\$1,577,579	\$52,586	\$149	354
Assessments		T1023		Encounter	2	3	\$677	\$339	\$226	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	2	21	\$7,898	\$3,949	\$376	11
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					911		\$8,348,145			

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Lifeways

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	27	398	\$114,594	\$4,244	\$288	15
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	124	127	\$13,370	\$108	\$105	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	5	7	\$378	\$76	\$54	1
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	31	167	\$16,112	\$520	\$96	5
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	1	\$106	\$106	\$106	1
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	6	46	\$2,022	\$337	\$44	8
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	256	868	\$79,989	\$312	\$92	3
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			0	0	\$0	\$0	\$0	0
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	5	17	\$1,614	\$323	\$95	3
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	24	25	\$4,084	\$170	\$163	1
Occupational Therapy		97004		Encounter	4	5	\$667	\$167	\$133	1
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	150	1,970	\$65,358	\$436	\$33	13
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	9	36	\$1,196	\$133	\$33	4
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	3	43	\$1,165	\$388	\$27	14
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	1	1	\$875	\$875	\$875	1
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	67	74	\$19,877	\$297	\$269	1
Crisis Residential Services		H0018		Days	5	29	\$7,616	\$1,523	\$263	6
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	34	34	\$4,709	\$139	\$139	1
Treatment Planning		H0032		Encounter	4	18	\$834	\$208	\$46	5
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	24	3,214	\$134,926	\$5,622	\$42	134
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	9	1,681	\$3,471	\$386	\$2	187
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	7	1,552	\$43,239	\$6,177	\$28	222
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	85	111	\$6,190	\$73	\$56	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	18	772	\$8,638	\$480	\$11	43
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	399	458,273	\$1,907,789	\$4,781	\$4	1,149
Community Living Supports (15 Minutes)		H2015		15 Minutes	10	7,334	\$33,407	\$3,341	\$5	733
Community Living Supports (Daily)		H2016		Per Diem	61	13,997	\$833,242	\$13,660	\$60	229
Community Living Supports (Daily)		H2016	TF	Per Diem	74	20,608	\$1,524,952	\$20,607	\$74	278
Community Living Supports (Daily)		H2016	TG	Per Diem	118	36,797	\$4,013,929	\$34,016	\$109	312
Behavior Services		H2019		15 Minutes	66	1,738	\$41,503	\$629	\$24	26
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	7	932	\$3,970	\$567	\$4	133
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	13	18,216	\$59,470	\$4,575	\$3	1,401
Medication Review		M0064		Encounter Face-to-Face	59	117	\$11,881	\$201	\$102	2
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	2	34	\$2,555	\$1,277	\$75	17
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	2	13	\$1,256	\$628	\$97	7
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	6	3,705	\$24,896	\$4,149	\$7	618
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	146	1,236	\$82,063	\$562	\$66	8
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	21	29	\$5,882	\$280	\$203	1
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	3	12,988	\$369,119	\$123,040	\$28	4,329
Assessment		T1001		Encounter	10	10	\$1,915	\$192	\$192	1
Health Services		T1002		Up to 15 min	148	5,434	\$180,296	\$1,218	\$33	37
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	94	39,849	\$253,119	\$2,693	\$6	424
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	328	20,522	\$529,172	\$1,613	\$26	63
Targeted Case Management		T1017		15 minutes	257	15,943	\$383,674	\$1,493	\$24	62
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	52	17,295	\$826,217	\$15,889	\$48	333
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	40	12,365	\$816,281	\$20,407	\$66	309
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	71	24,794	\$2,211,337	\$31,146	\$89	349
Assessments		T1023		Encounter	27	28	\$4,066	\$151	\$145	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	180	2,786	\$13,377	\$74	\$5	15
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	42	4,856	\$41,946	\$999	\$9	116
Targeted Case Management (Children's Waiver)		T2023		Month	3	18	\$3,685	\$1,228	\$205	6
Fiscal Intermediary Services		T2025		Month	31	223	\$28,465	\$918	\$128	7
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			402	0	\$64,358	\$160	\$0	0
Total Population and Cost					570		\$14,804,850			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	2	709	\$209,729	\$104,865	\$296	355
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1	16	\$10,773	\$10,773	\$673	16
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	14	14	\$3,794	\$271	\$271	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	3	5	\$425	\$142	\$85	2
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	7	67	\$10,930	\$1,561	\$163	10
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	3	22	\$3,267	\$1,089	\$149	7
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	78	310	\$41,763	\$535	\$135	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	13	19	\$4,628	\$356	\$244	1
Speech & Language Therapy		92507		Encounter	15	145	\$34,190	\$2,279	\$236	10
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	9	14	\$7,737	\$860	\$553	2
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			16	25	\$14,753	\$922	\$590	2
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	3	6	\$4,990	\$1,663	\$832	2
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	22	27	\$5,919	\$269	\$219	1
Occupational Therapy		97004		Encounter	36	66	\$11,420	\$317	\$173	2
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	2	192	\$3,949	\$1,975	\$21	96
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	8	135	\$3,883	\$485	\$29	17
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	8	98	\$2,819	\$352	\$29	12
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	1	5	\$144	\$144	\$29	5
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	4	24	\$690	\$173	\$29	6
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	7	80	\$891	\$127	\$11	11
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	2	4	\$1,256	\$628	\$314	2
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	118	118	\$58,945	\$500	\$500	1
Treatment Planning		H0032		Encounter	8	13	\$2,266	\$283	\$174	2
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	1	117	\$6,849	\$6,849	\$59	117
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	21	55	\$1,146	\$55	\$21	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	3	9	\$687	\$229	\$76	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	100	206,743	\$802,163	\$8,022	\$4	2,067
Community Living Supports (15 Minutes)		H2015		15 Minutes	88	875,967	\$2,925,730	\$33,247	\$3	9,954
Community Living Supports (Daily)		H2016		Per Diem	8	2,517	\$341,607	\$42,701	\$136	315
Community Living Supports (Daily)		H2016	TF	Per Diem	23	6,828	\$416,508	\$18,109	\$61	297
Community Living Supports (Daily)		H2016	TG	Per Diem	22	5,335	\$934,532	\$42,479	\$175	243
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	37	31,964	\$96,851	\$2,618	\$3	864
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	2	3,548	\$23,878	\$11,939	\$7	1,774
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	4	5	\$3,682	\$920	\$736	1
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	4	9	\$7,104	\$1,776	\$789	2
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	130	123,949	\$261,532	\$2,012	\$2	953
Respite		S5151		Per Diem	2	26	\$11,657	\$5,829	\$448	13
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Persons with Developmental Disabilities

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State of Michigan

Livingston										
Service Category	Revenue Code	HCPDS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Reidential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	31	35	\$31,342	\$1,011	\$895	1
Health Services		T1002		Up to 15 min	48	1,197	\$125,936	\$2,624	\$105	25
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	16	8,564	\$98,743	\$6,171	\$12	535
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	306	5,971	\$671,558	\$2,195	\$112	20
Targeted Case Management		T1017		15 minutes	4	79	\$7,793	\$1,948	\$99	20
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	2	39	\$3,847	\$1,924	\$99	20
Personal Care in Licensed Specialized Residential Setting		T1020		Days	6	1,391	\$37,738	\$6,290	\$27	232
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	14	4,415	\$258,719	\$18,480	\$59	315
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	27	8,497	\$540,664	\$20,025	\$64	315
Assessments		T1023		Encounter	1	1	\$158	\$158	\$158	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	7	9	\$457	\$65	\$51	1
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	25	15,557	\$140,169	\$5,607	\$9	622
Targeted Case Management (Children's Waiver)		T2023		Month	9	84	\$59,476	\$6,608	\$708	9
Fiscal Intermediary Services		T2025		Month	5	23	\$8,273	\$1,655	\$360	5
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	2	2	\$2,919	\$1,460	\$1,460	1
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	1	2	\$5,890	\$5,890	\$2,945	2
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					337		\$8,266,772			

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Persons with Developmental Disabilities
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State of Michigan
Macomb

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	4	1,162	\$308,576	\$77,144	\$266	291
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	8	24	\$2,914	\$364	\$121	3
Medication Administration		90782		Encounter	5	11	\$1,331	\$266	\$121	2
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	717	766	\$319,316	\$445	\$417	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	10	17	\$1,278	\$128	\$75	2
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	47	222	\$19,809	\$421	\$89	5
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	27	134	\$17,682	\$655	\$132	5

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	38	\$2,626	\$2,626	\$69	38
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	16	263	\$18,838	\$1,177	\$72	16
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	577	2,248	\$202,536	\$351	\$90	4
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	63	77	\$7,977	\$127	\$104	1
Speech & Language Therapy		92507		Encounter	67	2,122	\$104,383	\$1,558	\$49	32
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	6	6	\$949	\$158	\$158	1
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	12	36	\$3,611	\$301	\$100	3
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			47	100	\$15,881	\$338	\$159	2
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	70	231	\$21,399	\$306	\$93	3
Neurobehavioral Status Exam (Children's Waiver)		96116			266	861	\$79,759	\$300	\$93	3
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	30	30	\$2,478	\$83	\$83	1
Physical Therapy		97002		Encounter	5	5	\$119	\$24	\$24	1
Occupational Therapy		97003		Encounter	307	453	\$162,776	\$530	\$359	1
Occupational Therapy		97004		Encounter	16	18	\$521	\$33	\$29	1
Occupational or Physical Therapy		97110		15 Minutes	27	2,599	\$47,055	\$1,743	\$18	96
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	22	55	\$5,446	\$248	\$99	3
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	2	10	\$990	\$495	\$99	5
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	2	3	\$297	\$149	\$99	2
Occupational or Physical Therapy		97530		15 Minutes	101	9,350	\$195,208	\$1,933	\$21	93
Occupational or Physical Therapy		97532		15 Minutes	2	26	\$378	\$189	\$15	13
Occupational or Physical Therapy		97533		15 Minutes	12	470	\$9,363	\$780	\$20	39
Occupational or Physical Therapy		97535		15 Minutes	52	189	\$16,574	\$319	\$88	4
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	89	788	\$78,025	\$877	\$99	9
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	35	335	\$36,883	\$1,054	\$110	10
Occupational Therapy		97760		15 Minutes	14	100	\$8,901	\$636	\$89	7
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	71	328	\$37,779	\$532	\$115	5
Assessment or Health Services		97803		15 Minutes	306	1,264	\$118,908	\$389	\$94	4
Health Services		97804		30 Minutes	3	7	\$628	\$209	\$90	2
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	1	292	\$141	\$141	\$0	292
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	13	71	\$3,335	\$257	\$47	5
Transportation		A0120			573	99,922	\$1,034,115	\$1,805	\$10	174
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			6	11	\$26,635	\$4,439	\$2,421	2
Comp periodontal evaluation		D0180		Encounter	2	3	\$7,766	\$3,883	\$2,589	2
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	2	6	\$1,490	\$745	\$248	3
Activity Therapy (Children's Waiver)		G0176		Encounter	37	1,038	\$71,991	\$1,946	\$69	28

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	924	999	\$451,862	\$489	\$452	1
Treatment Planning		H0032		Encounter	998	3,263	\$954,666	\$957	\$293	3
Health Services		H0034		15 Minutes	6	7	\$474	\$79	\$68	1
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	86	16,445	\$2,271,635	\$26,414	\$138	191
Respite		H0045		Per Diem	187	3,335	\$731,073	\$3,909	\$219	18
Behavior Management Review		H2000		Encounter	254	271	\$27,810	\$109	\$103	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	25	192	\$21,305	\$852	\$111	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	1,082	3,366,421	\$10,889,195	\$10,064	\$3	3,111
Community Living Supports (15 Minutes)		H2015		15 Minutes	932	4,387,319	\$16,243,350	\$17,428	\$4	4,707
Community Living Supports (Daily)		H2016		Per Diem	266	88,804	\$2,406,809	\$9,048	\$27	334
Community Living Supports (Daily)		H2016	TF	Per Diem	173	44,540	\$2,643,723	\$15,282	\$59	257
Community Living Supports (Daily)		H2016	TG	Per Diem	169	55,467	\$5,276,120	\$31,220	\$95	328
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	358	346,968	\$1,563,573	\$4,368	\$5	969
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	204	1,319	\$125,733	\$616	\$95	6
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	79	884	\$114,642	\$1,451	\$130	11
Chore Services		S5120		15 Minutes	3	300	\$1,884	\$628	\$6	100
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	22	36,108	\$73,624	\$3,347	\$2	1,641
Respite		S5151		Per Diem	104	2,519	\$296,681	\$2,853	\$118	24
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	1	5	\$230	\$230	\$46	5
Environmental Modification		S5165		Service	41	50	\$146,439	\$3,572	\$2,929	1
Enhanced Medical Equipment-Supplies		S5199		Items	154	222	\$77,178	\$501	\$348	1
Occupational or Physical Therapy		S8990		Encounter	57	3,312	\$215,942	\$3,788	\$65	58
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	2	13	\$6,294	\$3,147	\$484	7
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	2	3	\$292	\$146	\$97	2
Health Services		S9470		Encounter	35	42	\$3,808	\$109	\$91	1
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	1	458	\$4,012	\$4,012	\$9	458
Assessment		T1001		Encounter	579	637	\$168,199	\$290	\$264	1
Health Services		T1002		Up to 15 min	599	5,464	\$870,815	\$1,454	\$159	9
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	711	1,923,581	\$7,211,458	\$10,143	\$4	2,705
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	2,189	69,051	\$5,940,740	\$2,714	\$86	32
Targeted Case Management		T1017		15 minutes	48	1,172	\$178,040	\$3,709	\$152	24
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	175	56,258	\$1,698,364	\$9,705	\$30	321
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	181	48,538	\$3,060,744	\$16,910	\$63	268
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	252	91,255	\$8,161,074	\$32,385	\$89	362
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	142	4,403	\$126,476	\$891	\$29	31
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	1	153	\$1,887	\$1,887	\$12	153
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Hour	285	147,590	\$1,019,937	\$3,579	\$7	518
Targeted Case Management (Children's Waiver)		T2023		Month	85	920	\$683,000	\$8,035	\$742	11
Fiscal Intermediary Services		T2025		Month	14	95	\$8,289	\$592	\$87	7
Enhanced Medical Equipment-Supplies		T2028		Items	58	85	\$56,662	\$977	\$667	1
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	79	617	\$144,002	\$1,823	\$233	8
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'I' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					2,415		\$76,874,708			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	3	816	\$246,409	\$82,136	\$302	272
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/TMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	1	4	\$292	\$292	\$73	4
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	12	12	\$4,865	\$405	\$405	1
Assessment-Psychiatric Assessment		90802		Encounter	1	1	\$929	\$929	\$929	1
Therapy-Individual Therapy		90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	18	71	\$21,375	\$1,188	\$301	4
Therapy-Individual Therapy		90806		Encounter 45-50 Min	5	7	\$869	\$174	\$124	1
Therapy-Individual Therapy		90807		Encounter 45-50 Min	2	4	\$2,003	\$1,002	\$501	2
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	1	1	\$264	\$264	\$264	1
Therapy-Family Therapy		90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	50	230	\$46,119	\$922	\$201	5
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			6	34	\$2,694	\$449	\$79	6
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	24	256	\$8,946	\$373	\$35	11
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	6	6	\$1,232	\$205	\$205	1
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	33	190	\$15,809	\$479	\$83	6
Treatment Planning		H0032		Encounter	70	89	\$11,486	\$164	\$129	1
Health Services		H0034		15 Minutes	1	2	\$108	\$108	\$54	2
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	41	4,870	\$624,877	\$15,241	\$128	119
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	25	66	\$2,664	\$107	\$40	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	5	14	\$1,936	\$387	\$138	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	99	49,230	\$552,968	\$5,586	\$11	497
Community Living Supports (15 Minutes)		H2015		15 Minutes	123	758,743	\$1,673,965	\$13,609	\$2	6,169
Community Living Supports (Daily)		H2016		Per Diem	3	1,095	\$7,003	\$2,334	\$6	365
Community Living Supports (Daily)		H2016	TF	Per Diem	1	365	\$13,494	\$13,494	\$37	365
Community Living Supports (Daily)		H2016	TG	Per Diem	30	9,780	\$1,085,005	\$36,167	\$111	326
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	69	24,337	\$474,520	\$6,877	\$19	353
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	3	3	\$161	\$54	\$54	1
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	0	0	\$0	\$0	\$0	0
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	1	20	\$349	\$349	\$17	20
Personal Emergency Response System (PERS)		S5160		Encounter	3	4	\$4,205	\$1,402	\$1,051	1
Personal Emergency Response System (PERS)		S5161		Month	3	36	\$11,802	\$3,934	\$328	12
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	24	66	\$6,843	\$285	\$104	3
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9124		Hour	0	0	\$0	\$0	\$0	0
Private Duty Nursing		S9124			0	0	\$0	\$0	\$0	0
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	0	0	\$0	\$0	\$0	0
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	3	9	\$4,255	\$1,418	\$473	3
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Health Services		T1000		Up to 15 min	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1	9	\$374	\$374	\$42	9
Health Services		T1002		Up to 15 min	20	60	\$51,625	\$2,581	\$860	3
Health Services		T1003		Up to 15 min	0	0	\$0	\$0	\$0	0
Health Services		T1005		15 minutes	40	36,494	\$70,987	\$1,775	\$2	912
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	91	4,992	\$303,005	\$3,330	\$61	55
Targeted Case Management		T1017		15 minutes	110	5,790	\$301,995	\$2,745	\$52	53
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	4	1,158	\$22,848	\$5,712	\$20	290
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	30	11,082	\$461,767	\$15,392	\$42	369
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	1	3	\$3,538	\$3,538	\$1,179	3
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
PASRR Level II Screens		T2011		Evaluation	11	43	\$10,091	\$917	\$235	4
Out of Home Prevocational Service		T2015		Hour	0	0	\$0	\$0	\$0	0
Targeted Case Management (Children's Waiver)		T2023		Month	2	26	\$976	\$488	\$38	13
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					213		\$6,054,653			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	8	47	\$28,361	\$3,545	\$603	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Extended Observation Beds	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90782		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		90788		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	59	67	\$13,967	\$237	\$208	1
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	4	4	\$102	\$25	\$25	1
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	16	62	\$3,395	\$212	\$55	4
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	2	6	\$458	\$229	\$76	3
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	8	42	\$1,068	\$134	\$25	5
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	154	822	\$145,601	\$945	\$177	5
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	19	132	\$56,142	\$2,955	\$425	7
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633			0	0	\$0	\$0	\$0	0
Assessments-Testing		96100		Hour	5	7	\$5,589	\$1,118	\$798	1
Psychological Testing PSYCH/PHYS (Children's Waiver)		96101			12	20	\$15,967	\$1,331	\$798	2
Psychological Testing by Technician (Children's Waiver)		96102			0	0	\$0	\$0	\$0	0
Psychological Testing by Comp (Children's Waiver)		96103			0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Testing		96115		Hour	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116			0	0	\$0	\$0	\$0	0
Assessments-Testing		96117		Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys (Children's Waiver)		96118			0	0	\$0	\$0	\$0	0
Neuropsych test by Tech (Children's Waiver)		96119			0	0	\$0	\$0	\$0	0

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Neuropsych test Admin w/Comp (Children's Waiver)		96120			0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	2	3	\$297	\$148	\$99	2
Physical Therapy		97002		Encounter	15	28	\$2,769	\$185	\$99	2
Occupational Therapy		97003		Encounter	18	23	\$8,164	\$454	\$355	1
Occupational Therapy		97004		Encounter	70	269	\$86,193	\$1,231	\$320	4
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97504		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	1	6	\$710	\$710	\$118	6
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Prosthetic Training (Children's Waiver)		97761		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use (Children's Waiver)		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Repair or Non-Routine Service for DME (Children's Waiver)		E1340		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Activity Therapy (Children's Waiver)		G0176		Encounter	0	0	\$0	\$0	\$0	0

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Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Medication administration		G0351			0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	3	3	\$1,007	\$336	\$336	1
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	286	942	\$279,567	\$978	\$297	3
Treatment Planning		H0032		Encounter	2	6	\$1,433	\$716	\$239	3
Health Services		H0034		15 Minutes	3	47	\$1,892	\$631	\$40	16
Home Based Services		H0036		15 Minutes	2	887	\$27,231	\$13,615	\$31	444
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	1	73	\$1,628	\$1,628	\$22	73
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	20	215	\$14,407	\$720	\$67	11
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention-Non-enrolled Service		H2011		15 Minutes	17	74	\$1,952	\$115	\$26	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	119	373,565	\$1,105,752	\$9,292	\$3	3,139
Community Living Supports (15 Minutes)		H2015		15 Minutes	149	1,046,474	\$3,746,377	\$25,143	\$4	7,023
Community Living Supports (Daily)		H2016		Per Diem	10	1,809	\$59,136	\$5,914	\$33	181
Community Living Supports (Daily)		H2016	TF	Per Diem	45	10,595	\$512,056	\$11,379	\$48	235
Community Living Supports (Daily)		H2016	TG	Per Diem	65	14,979	\$1,866,683	\$28,718	\$125	230
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	3	17	\$5,945	\$1,982	\$350	6
Supported Employment Services		H2023		15 minutes	24	16,718	\$216,832	\$9,035	\$13	697
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	9	17,009	\$62,593	\$6,955	\$4	1,890
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	1	\$127	\$127	\$127	1
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	5	53	\$6,471	\$1,294	\$122	11
Chore Services		S5120		15 Minutes	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	1	1	\$3,985	\$3,985	\$3,985	1
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing	0582	S9123		Hour	1	1,097	\$66,577	\$66,577	\$61	1,097
Private Duty Nursing		S9123			0	0	\$0	\$0	\$0	0